SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) for each category of the Detailed Summary Page

FUR LINE NUMBER.					FAGL	•	9	Oi		44
(chec	(check only one)									
X	11a		11b		11c		12			
	13		14		15		16			17

	Statements may not be sold or used by any persibe name and address of any political committee t					
NAME OF COMMITTEE (In Full) American Dental Association I	Political Action Committee					
Full Name (Last, First, Middle Initial) Dr Nathalie Dube Mailing Address 524 S Fancher St Ste C City Mt Pleasant FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MI 48858-2617 C Occupation Dentist Aggregate Year-to-Date ▼ 500.00	Date of Receipt 09 30 2015 Transaction ID: A74D62D28326043DE8F9 Amount of Each Receipt this Period 500.00				
Full Name (Last, First, Middle Initial) Dr Julian H Fair III Mailing Address 1040 Wagener Trail Rd City Wagener FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code SC 29164-9124 C Occupation Dentist Aggregate Year-to-Date ▼	Date of Receipt 99 25 2015 Transaction ID: AA786C3D3F8184614ADA Amount of Each Receipt this Period 1000.00				
Full Name (Last, First, Middle Initial) Dr Howard Andrew Hamerink Mailing Address 10306 Normandy Dr City Plymouth FEC ID number of contributing federal political committee. Name of Employer self-employed Receipt For: Primary General Other (specify)	State Zip Code MI 48170-3246 C Occupation Dentist Aggregate Year-to-Date ▼ 500.00	Date of Receipt 99 29 2015 Transaction ID : A9A04EC6E4E4142C896C Amount of Each Receipt this Period 500.00				
SUBTOTAL of Receipts This Page (optional).	>	2000.00				
TOTAL This Period (last page this line number	er only)					